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I beroby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile trensmitted to the USPTO (571) 273-2885, on the date indicated below. FISH & NEAVE IP GROUP **ROPES & GRAY LLP** 1251 AVENUE OF THE AMERICAS FL C3 NEW YORK, NY 10020-1105 Lily Jiang, (Dénésites's name) 00000050 061075 10658111 12/19/2006 CCHAU2 Xuli! December 18, 2006 01 FC:1501 1400.00 DA (Date) FILING DATE FIRST NAMED INVENTIOR ATTORNEY DOCKET NO. CONFIRMATION NO. 10/658,111 09/08/7003 Francesco Salinum VPL98-11 DIV 0044 TITLE OF INVENTION: INHIBITORS OF P38 SMALL ENTITY ISSUE FEE DUE PUBLICATION FEE DUE PREV. PAID ISSUE FEE APPLN, TYPE TOTAL FEE(3) DUE DATE DUE nonprovisional NO \$1400 \$300 50 \$1700 12/19/2006 EXAMINER ART UNIT CLASS-SUBCLASS RAO, DEEPAR R 1624 514-235500 1. Change of correspondence address or indication of Fee Address (37 CFR 1.363). 2. For printing on the patent front page, list Fish & Neave IP Group I Ropes & Gray LLP (1) the names of up to 3 registered patent atterneys or agents OR, alternatively, Change of correspondence address (or Change of Correspondence Address form: PTO/SB/122) attached. James F. Haley, Jr. (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no mame will be printed. "Fee Address" indication (or "Fee Address" Indication form PTO/SR/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. David A. Roise 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print of type) PLEASE NOTE: Unless an assignant is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filled for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filling an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) CAMBRIDGE, MASSACHUSETTS VERTEX PHARMACEUTICALS INCORPORATED Please check the appropriate assignce entegory or entegories (will not be printed on the patent): 🚨 Individual 🖾 Corporation or other private group entity 🚨 Government 4s. The following fee(s) are submitted: 4b. Payment of Fec(s): (Please first reapply any previously paid issue fee shown above) ☑ Issue Fee A check is enclosed. Dublication Fee (No small entity discount permitted) Payment by credit eard. Form PTO-2038 is attached. The Director is beroby authorized to charge the required feets), any deficiency, or credit any overpayment, to Deposit Account Number os 107515522-21) (enclose an extra copy of this form). Advance Order - # of Copies ____5 Change in Entity Status (from status indicated above) a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2). NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attendey or agent; or the assignee or other party in interest as shown by the recopus of the United States Patent and Prademark Office. Date December 18, 2006 Authorized Signature David A. Roise Registration No. 47,904 Typed or printed name _ This collection of information is required by 37 CFR 1.311. The information is required to obtain or rotain a benefit by the public which is to file (and by the USFTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USFTO. Time will vary depending upon the individual cate. Any comments on the ansural of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450. o are required to respond to a suffection of information unless is displays a Yalid OMID scanni number.

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